



ISSN 2456-3110

Vol 6 · Issue 2

Mar-Apr 2021

# Journal of **Ayurveda and Integrated Medical Sciences**

*www.jaims.in*

# JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



**Charaka**  
Publications

Indexed

# A review on the role of NABH standards in Ayurvedic Hospital

Isha Puri<sup>1</sup>, Priya Puesh Pargotra<sup>2</sup>

<sup>1</sup>Deputy Manager, Max Superspeciality Hospital, Bathinda, Punjab, India.

<sup>2</sup>Associate Professor, Dept. of Bala Roga, Saint Sahara Ayurvedic Medical College, Bathinda, Punjab, India.

## ABSTRACT

**Background** - Demand for Ayurveda is gradually growing in medical tourism. The quality health care and cost-effective treatment gives Ayurveda advantages in modern health tourism. People with uncontrolled medical neuro-muscular conditions such as Muscular dystrophy, myopathies, Multiple sclerosis, Myasthenia gravis, Parkinson's disease and Autism are exploring possible Ayurvedic treatment globally. *Panchakarma, Yoga, Marma Chikitsa, Ksharsutra, Rasaushadhi* etc. are super specialities of Ayurveda, having no other alternative at all, are becoming attractions, raising medical tourism in India. Kerala is now the hub of Ayurvedic medical tourism in the country. In this era, evaluation of organization as per their performance & quality has become integral part of health sector of India. NABH has established standards by keeping in mind, enhancement of health system & promotion of continuous quality improvement & patient safety. **Objective** - To have a review on the of NABH standards in Ayurvedic hospitals. **Design** - NABH accreditation standards for Ayurveda hospitals second edition is referred to have review on the of NABH standards in Ayurvedic hospitals. **Results** - Ayurveda hospital accreditation standards consist of 10 chapters, further divided into 98 standards, incorporation of 590 objective elements. These standards are requirements led by NABH which facilitate safe high-quality care. **Conclusion** - Patients are well aware about quality health services, especially in terms of medical tourism expects standard & safety assurance. These NABH accreditation standards setting benchmark for AYUSH hospitals, helps in enhancing significance in health sector in India.

**Key words:** Medical Tourism, NABH, Panchakarma, Quality Assurance, AYUSH hospitals

## INTRODUCTION

The word Ayurveda is a combination of two Sanskrit terms – 'Ayur' meaning 'life' and 'Veda' meaning 'knowledge.' This collection of principles of healthy living has been followed in India for centuries, and is one of the world's oldest healing systems. The fundamental belief of Ayurveda medicine is that health and wellness depend on the balance of mind, body and spirit. The word Ayurveda conjures up

images of calm, relaxation, balance and rejuvenation in exotic India. It is, in fact, a complete traditional medicine practice and life philosophy dating back 5000 years. It has also become a significant driver of medical and wellness tourism in India, as the awareness of its benefits has spread, particularly in the western world.

Ayurveda encompasses preventive and curative health, with the ultimate aim being to "attain liberation (*Moksha*) through healthy living". It embodies a philosophy of life that is aimed at achieving balance and maintaining stability. *Panchakarma, Yoga Science, Marma Chikitsa, Ksharsutra, Rasaushadhi* etc. are super specialities of Ayurveda, having no other alternative at all, are becoming attractions, raising medical tourism in India. Especially Panchakarma glowing globally, defining many other prospective (wellness, rejuvenation, detoxification, relaxation, etc.) other than just curative treatment.

### Address for correspondence:

Dr. Priya Puesh Pargotra

Associate Professor, Dept. of Bala Roga, Saint Sahara Ayurvedic Medical College, Bathinda, Punjab, India.

E-mail: puehpargotra@gmail.com

Submission Date: 17/03/2021

Accepted Date: 22/04/2021

### Access this article online

#### Quick Response Code



Website: [www.jaims.in](http://www.jaims.in)

Published by Maharshi Charaka  
Ayurveda Organization, Vijayapur,  
Karnataka (Regd) under the license CC-  
by-NC-SA

Here are some attributes of the Ayurveda medicine system that typically appeal to wellness tourists:

- Completely natural treatments
- Non-invasive treatments
- Non-toxic
- Promotes the body's capacity for maintenance and balance
- Preventive and curative focus
- Rejuvenating and relaxing
- Physical, mental and spiritual (mind-body medicine)
- It is easily incorporated into western medical treatments and lifestyles.
- Recognized by leading bodies as a traditional system of medicine
- Used for a wide range of conditions including chronic, stress-related and metabolic conditions

India is an established medical tourism destination, already serving thousands of medical tourists worldwide, including and not limited to Nepal, Afghanistan, Bangladesh, Iran, Iraq, Yemen, Kenya and Nigeria. More recently, India is being promoted as a cultural and wellness tourism destination to meet the rising demand for wellness tourism from Europe and Asia. India's ancient healing practices, yoga, naturopathy, and Ayurvedic treatments offer attractive options for European tourists seeking a wellness vacation. Ayurveda has a growing influence on holistic healthcare and wellness tourism. The Global Ayurvedic Market has been growing at an average annual rate of 16.2% since 2015, reflecting the rising demand for alternative medicine and wellness experiences.<sup>[2]</sup>

This growth is driven by:

- Rising consumer awareness about health and wellness
- Acceptance by mainstream western medicine
- Increasing demand for natural products
- Global shift in medicine towards preventive practices
- Demand for Ayurvedic cosmetics products
- The popularity of anti-ageing and anti-wrinkle creams

In India, Ayurveda is practiced daily and is part of the fabric of the nation. The emergence of Ayurveda Centres with international certifications of quality practice is fuelling the growth of medical and wellness tourism in the country. Ayurveda treatment and massage packages offer great value for money for wellness tourists. They are attracting large numbers of Western and Gulf medical tourists to the country every year. Ayurveda has established India as a genuinely world-class medical and wellness destination. The country is well positioned to benefit from the expected rise in demand for wellness retreats after the pandemic.<sup>[3]</sup>

#### NABH

National Accreditation Board for Hospitals and Healthcare Providers (NABH) is a constituent board of Quality Council of India (QCI), set up to establish & operate accreditation programme for healthcare organizations.

#### Objectives of NABH

- Enhance health system
- Promote continuous quality improvement & patient safety. NABH offers empowerment services to Hospitals, Small Health Care Organizations/Nursing Homes, Blood Banks, OST Centres, Wellness centres & Medical Imaging Services. Empowerment of AYUSH Hospitals is a new initiative of NABH.

#### Benefits of Accreditation

Benefits for Patients - Patients are the biggest beneficiary among all the stakeholders. Accreditation results in high quality of care & patient safety. The patients are serviced by credential medical staff. Rights if patients are respected & protected. Patient's satisfaction is regularly evaluated.

Benefits for Ayurveda Hospitals - Accreditation to an Ayurveda Hospital stimulates continuous improvement. It enables hospital in demonstrating commitment to quality care. It raises community confidence in the services provided by the Ayurveda Hospital. It also provides opportunity to healthcare unit to benchmark with the best.

Benefits for Hospital Staff - The staff in an accredited Ayurveda hospital is satisfied lot as it provides for continuous learning, good working environment, leadership & above all ownership of clinical processes. It improves overall professional development of clinicians & Para Medical Staff & provides leadership for quality improvement with medicine & nursing.

Benefits to paying & regulatory bodies - Finally, accreditation provides an objective system of empanelment by insurance & other third parties. Accreditation provides access to reliable & certified information on facilities, infrastructure & level of care.

### NABH Standards

NABH Standards for Ayurveda hospitals prepared by technical committee contains complete set of standards for evaluation of Ayurveda hospitals for grant of accreditation. The standards provide framework for quality of care for patients & quality improvement for Ayurveda hospitals. The standards help to build a quality culture at all level & across all the function of Ayurveda hospitals. A minimum bed strength of 10 beds is essential for a hospital to be considered for the Accreditation Program.<sup>[4]</sup>

NABH Accreditation Standards for Ayurveda Hospitals has 10 chapters incorporating 94 standards & 489 objective elements.

### Chapter 1 - Access Assessment and Continuity Care (AAC)

Patients are well informed of the services that an organization can and cannot provide. This will facilitate in appropriately matching patients with the organization's resources. Only those patients who can be cared for by the organization are admitted to the organization. Out-patients who do not match the organization's resources are similarly referred to organizations that have the matching resources. Patients that match the organizations resources are admitted using a defined process that includes patient and family education. Patients cared for by the organization undergo an established initial assessment and periodic and regular reassessments.

#### Summary of standards

1. The organisation defines and displays the services that it provides.

2. The organisation has a well-defined registration and admission process.
3. There is an appropriate mechanism for transfer or referral of patients who do not match the organizational resources.
4. Patients cared for by the organisation undergo an established initial assessment.
5. All patients cared for by the organisation undergo a regular reassessment.
6. Laboratory services, if applicable are provided as per the scope of services of the organisation.
7. There is an established laboratory quality assurance programme.
8. There is an established laboratory-safety programme.
9. Imaging services, if applicable are provided as per the scope of services of the organization.
10. There is an established quality assurance programme for imaging services.
11. There is an established radiation safety programme.
12. Patient care is continuous and multidisciplinary in nature.
13. The organization has a documented discharge process.
14. Organization defines the content of the discharge summary.

### Chapter 2 - Care of Patients (COP)

The organization provides uniform care of patients in different settings. The different settings include care provided in outpatient units, various categories of wards, procedure rooms and operation theatre. When similar care is provided in these different settings, care delivery is uniform. Policies, procedures, applicable laws and regulations guide emergency and ambulance services, cardio-pulmonary resuscitation. The standards aim to guide and encourage patient safety as the overall principle for providing care to patients.<sup>[5]</sup>

#### Summary of standards

1. Uniform care of patients is provided in all settings of the organization and is guided by the applicable laws, regulations and guidelines.

2. Emergency services are guided by policies, procedures and applicable laws and regulations.
3. The ambulance services are commensurate with the scope of the services provided by the organization.
4. Documented policies and procedures guide the care of vulnerable patients (elderly, physically and/or mentally challenged and children).
5. Documented policies and procedures guide obstetric (Ante Natal & Post Natal) care.
6. Documented policies and procedures guide obstetric (Normal Labour and Caesarean Section) care.
7. Documented policies and procedures guide Neonatal care.
8. Documented policies and procedures guide the care of Paediatric patients.
9. Documented policies and procedures guide the care of patients undergoing surgical, parasurgical, panchakarma and other treatment procedures.
10. Documented policies and procedures guide the care of patients undergoing moderate sedation.
11. Documented policies and procedures guide the administration of anaesthesia.
12. Documented policies and procedures define rational use of blood and blood products.
13. Documented policies and procedures guide the care of patients in the intensive care and high dependency units.
14. Documented policies and procedures guide the care of patients under restraints.
15. Documented policies and procedures guide appropriate pain management.
16. Documented policies and procedures guide appropriate rehabilitative services.
17. Documented policies and procedures guide all research activities.
18. Documented policies and procedures guide Therapeutic diet.

### Chapter 3 - Management of Medication (MOM)

#### Intent of the standards

The organization has a safe and organized medication process. The process includes documented policies

and procedures that guide the availability, safe storage, prescription, dispensing and administration of medications. The standards encourage integration of the pharmacy into everyday functioning of hospitals and patient care. The pharmacy should have oversight of all medications stocked out of the pharmacy. The pharmacy should ensure correct storage (as regards to temperature, look-alike, sound-alike etc), expiry dates and maintenance of documentation. Every high alert medication order should be verified by an appropriate person so as to ensure accuracy of the dose, frequency and route of administration. Safe use of high alert medication is guided by documented policies and procedures. Patients and family members are educated about safe medication. Policies and procedures guide the use of medical supplies and consumables.<sup>[6]</sup>

#### Summary of standards

1. The organization protects patient and family rights and informs them about their responsibilities during care.
2. Patient and family rights support individual beliefs, values and involve the patient and family in decision making processes.
3. The patient and/or family members are educated to make informed decisions and are involved in the care planning and delivery process.
4. A documented process for obtaining patient and/or family's consent exists for informed decision making about their care.
5. Patient and families have a right to information and education about their healthcare needs.
6. Patient and families have a right to information on expected costs.
7. Organisation has a complaint redressal procedure.

### Chapter 4 - Patient Rights and Education (PRE)

#### Intent of the standards

The organization defines the patient and family rights and responsibilities. The staff is aware of these and is trained to protect patient rights. Patients are informed of their rights and educated about their responsibilities at the time of admission. The patients are educated about the mechanisms available for

addressing grievances. A documented process for obtaining patient and/or families consent exists for informed decision making about their care as per prevailing law. Patient and families have a right to information and education about their healthcare needs in a language and manner that is understood by them.<sup>[7]</sup>

#### Summary of standards

1. The organization protects patient and family rights and informs them about their responsibilities during care.
2. Patient and family rights support individual beliefs, values and involve the patient and family in decision making processes.
3. The patient and/or family members are educated to make informed decisions and are involved in the care planning and delivery process.
4. A documented process for obtaining patient and/or family's consent exists for informed decision making about their care.
5. Patient and families have a right to information and education about their healthcare needs.
6. Patient and families have a right to information on expected costs.
7. Organisation has a complaint redressal procedure.

#### Chapter 5 - Hospital Infection Control (HIC)

##### Intent of the standards

The standards guide the provision of an effective infection control program in the organization. The program is documented and aims at reducing / eliminating infection risks to patients, visitors and providers of care. The organization measures and takes action to prevent or reduce the risk of Hospital Associated Infection (HAI) in patients and employees. The organization provides proper facilities and adequate resources to support the Infection Control Program. The program includes an action plan to control outbreaks of infection, disinfection / sterilization activities, Bio-medical Waste (BMW) management, training of staff and employee health.<sup>[8]</sup>

##### Summary of standards

1. The organization has a well-designed, comprehensive and coordinated Hospital

Infection Prevention & Control (HIC) programme aimed at reducing/ eliminating risks to patients, visitors and providers of care.

2. The organization implements the policies and procedures laid down in the Infection Control Manual.
3. The organization performs surveillance activities to capture and monitor infection prevention and control data.
4. The organization takes actions to prevent or reduce the risk of Hospital Associated Infections (HAI) in patients and employees.
5. The organization provides adequate and appropriate resources for prevention and control of Healthcare Associated Infections (HAI).
6. Biomedical waste (BMW) is handled in an appropriate and safe manner.
7. The infection control programme is supported by the organization's management and includes training of staff.
8. There are documented policies and procedures for sterilization activities in the organization.<sup>[9]</sup>

#### Chapter 6 - Continuous Quality Improvement (CQI)

##### Intent of the standards

The standards encourage an environment of continuous quality improvement. The quality program should be documented and involve all areas of the organization and all staff members. The organization should collect data on structures, processes and outcomes, especially in areas of high-risk situations. The collected data should be collated, analysed and used for further improvements. The improvements should be sustained. Infection control and patient safety plans should also be integrated into the organization's quality plan. The organization should define its sentinel events and intensively investigate when such events occur. The quality programme should be supported by the management.

##### Summary of standards

1. There is a structured quality improvement and continuous monitoring programme in the organization.

2. There is a structured patient-safety programme in the organisation.
3. The organization identifies key indicators to monitor the clinical structures, processes and outcomes which are used as tools for continual improvement.
4. The organization identifies key indicators to monitor the managerial structures.
5. The quality improvement programme is supported by the management.
6. There is an established system for clinical audit.
7. Incidents, complaints and feedback are collected and analysed to ensure continual quality improvement.
8. Sentinel events are intensively analysed.<sup>[10]</sup>

#### Chapter 7 - Responsibilities of Management (ROM)

##### Intent of the standards

The standards encourage the governance of the organization in a professional and ethical manner. The organization complies with the laid down and applicable legislations and regulations. The responsibilities of the leaders at all levels are defined. The services provided by each department are documented. Leaders ensure that patient safety and risk management issues are an integral part of patient care and hospital management.

1. The responsibilities of the management are defined.
2. The organization complies with the laid-down and applicable legislations and regulations.
3. The services provided by each department are documented.
4. The organization is managed by the leaders in an ethical manner.
5. The organisation displays professionalism in management of affairs.
6. Management ensure that patient safety aspects and risk management issues are an integral part of patient care and hospital management.<sup>[11]</sup>

#### Chapter 8 - Facility Management and Safety (FMS)

##### Intent of the standards

The standards guide the provision of a safe and secure environment for patients, their families, staff and

visitors. To ensure this, the organization complies with the relevant rules and regulations, laws and byelaws and requisite facility inspection requirements. The organization plans for emergencies within the facilities and the community. The organization provides for safe water, electricity, medical gases and vacuum systems. The organization has a program for clinical and support service equipment management.

##### Summary of standard

1. The organisation has a system in place to provide a safe and secure environment.
2. The organisation's environment and facilities operate to ensure safety of patients, their families, staff and visitors.
3. The organisation has a programme for engineering support services.
4. The organisation has a programme for bio-medical equipment management.
5. The organisation has a programme for medical gases, vacuum and compressed air if applicable.
6. The organisation has plans for fire and non-fire emergencies within the facilities.
7. The organisation has a plan for management of hazardous materials.
8. The organisation has herbal plantation.<sup>[12]</sup>

#### Chapter 9 - Human Resource Management (HRM)

##### Intent of the standards

The most important resource of a hospital and health care system is the human resource. Human resources are an asset for effective and efficient functioning of a hospital. Without an equally effective human resource management system, all other inputs like technology, infrastructure and finances come to naught. Human resource management is concerned with the "people" dimension in management. The goal of human resource management is to acquire, provide, retain and maintain competent people in right numbers to meet the needs of the patients and community served by the organization.

Effective Human Resource Management involves the following processes and activities:

- a) Acquisition of Human Resources which involves human resource planning, recruiting and socialization of the new employees.
- b) Training and development relates to the performance in the present and future anticipated jobs. The employees are provided with opportunities to advance personally as well as professionally.
- c) Motivation relates to job design, performance appraisal and discipline.
- d) Maintenance relates to safety and health of the employees. The term “staff / employee” refers to all salaried personnel working in the organization as well as contractual personnel. It does not refer to “fee for service” medical professionals.

#### Summary of standards

1. The organization has a documented system of human resource planning.
2. The organisation has a documented procedure for recruiting staff and orienting them to the organisation’s environment.
3. There is an ongoing programme for professional training and development of the staff.
4. Staff, students and volunteers are adequately trained on specific job duties or responsibilities related to safety.
5. An appraisal system for evaluating the performance of an employee exists as an integral part of the human resource management process.
6. The organization has a well-documented disciplinary procedure.
7. A grievance handling mechanism exists in the organization.
8. The organization addresses the health needs of the employees.
9. There is a documented personal record for each staff member.
10. There is a process for credentialing and privileging of medical professionals, permitted to provide patient care without supervision.
11. There is a process for credentialing and privileging of nursing professionals, permitted to provide patient care without supervision.

12. There is a process for collecting, verifying and evaluating the credentials (education, training and experience) of Panchakarma Therapist, Paricharaka.<sup>[13,14]</sup>

#### Chapter 10 - Information Management System (IMS)

Intent of Standards Information is an important resource for effective and efficient delivery of health care. Provision of health care and its continued improvement is dependent to a large extent on the information generated, stored and utilized appropriately by the organizations. The goal of Information Management in a hospital is to ensure that the required inputs are available to the right personnel. This is provided in an authenticated, secure and accurate manner at the right time and place. This helps to achieve the ultimate organizational goal of a satisfied and improved provider and recipient of health care.

#### Summary of standards

1. Documented policies and procedures exist to meet the information needs of the care providers, management of the organization as well as other agencies that require data and information from the organization.
2. The organization has processes in place for effective management of data.
3. The organization has a complete and accurate medical record for every patient.
4. The medical record reflects continuity of care.
5. Documented policies and procedures are in place for maintaining confidentiality, integrity and security of information.
6. Documented policies and procedures exist for retention time of records, data and information.
7. The organization regularly carries out review of medical records.<sup>[15]</sup>

#### DISCUSSION

The 1<sup>st</sup> edition of NABH standard has been in practice for last six years now (2009-15) & is revised & upgraded to 2<sup>nd</sup> edition. The Accreditation Standards of NABH are categorized into chapters according to



various aspects e.g., patient's rights & safety, staff rights & safety, documentation & management, patient care, pro forma of services, infrastructure requirements, etc.<sup>[16]</sup>

## CONCLUSION

Accreditation improves the overall quality of care in Ayurvedic healthcare facilities. In certain specialty areas, accreditation programs even improve patient outcomes. The standards ensure that patients will receive consistent, excellent care throughout the facility. National accreditation system for Ayurveda hospitals ensures that hospitals, whether public or private, national or expatriate, play their expected roles in national health system. NABH has now gone global & is making its mark internationally. The Accreditation standards of NABH are not expected to be oppressive; they only lay down the requirements of standards which an Ayurveda hospital can follow.<sup>[17]</sup>

## REFERENCES

1. Joseph S. The Effect of Accreditation on Patient Satisfaction in Public Healthcare Delivery: A Comparative Study of Accredited and Non-accredited Hospitals in Kerala. Rajgiri Journal of Social Development. 2018;10(2):27-40
2. Rastogi S. Effectiveness, safety, and standard of service delivery: A patient-based survey at a pancha karma therapy unit in a secondary care Ayurvedic hospital. Journal of Ayurveda and integrative medicine. 2011 Oct;2(4):197.
3. National Accreditation Board for Hospitals & Healthcare providers (NABH), General information brochure. 2010.
4. National Accreditation Board for Hospitals & Healthcare providers (NABH), Accreditation Standards for Ayurveda Hospitals. 2nd edition, April 2016.
5. Janmejaya Samal. Health informatics: An offbeat yet attractive career alternative for AYUSH graduates in India. Ayurpharm Int J Ayur Alli Sci. 2013;2(6):174-180.
6. Mandeep, Chitkara N, Goel S. Study to evaluate change of attitude toward acceptance of NABH guidelines: An intrainstitutional experience. J Nat Accred Board Hosp Healthcare providers 2014;1:52-55
7. David SN, Valas S. National Accreditation Board For Hospitals and Healthcare Providers (NABH) Standards: A review. Curr Med Issues 2017;15:231-236
8. Patwardhan B. Ayurveda: Finding place in own house. J Ayurveda Integr Med 2012;3:109-
9. Hittinahalli V, Golia S. NABH Accreditation and its status in the Country. Al Ameen J Med Sci. 2013;6(1):3-6
10. Rao GH. Opportunities and challenges in Ayurveda: global perspective. Altern Integr Med. 2017;6(2):239 11. Pramod PS, Vishnu AN. A REVIEW ON SAFETY OF AYURVEDIC MEDICINE. Facilities.;1:2.
11. NABH accreditation standards in perspective of panchakarma clinics and hospitals – A Review. 2021, Vol. 05, Issue 2<sup>nd</sup>.
12. Mahindroo GV. Quality Accreditation in AYUSH Healthcare Services. Annals of Ayurvedic medicine. 2017;6(3):83-5.
13. Gluck E. Incredible (Accreditable) India: Trends in Hospital Accreditation Coexistent with the Growth of Medical Tourism in India. Louis UJ Health L. & Pol'y. 2007;1:459.
14. Suhail P, Srinivasulu Y. Perception of service quality, satisfaction, and behavioural intentions in Ayurveda Healthcare. Journal of Ayurveda and integrative Medicine. 2020 Dec
15. Gyani GJ, Krishnamurthy B. The national accreditation board for hospital and health care providers accreditation programme in India. HMA. 2014 Jan 1;50(1):19.
16. Shreedevi D. Hospital preparedness for NABH accreditation with respect to patient rights and education. International Journal of Business Management & Research (IJBMR) Oct. 2013 Oct;3.
17. Jose R, Sachdeva S. Keeping an eye on future: Medical tourism. Indian Journal of community medicine: official publication of Indian Association of Preventive & Social Medicine. 2010 Jul;35(3):376.

**How to cite this article:** Isha Puri, Priya Puesh Pargotra. A review on the role of NABH standards in Ayurvedic Hospital. J Ayurveda Integr Med Sci 2021;2:212-219.

**Source of Support:** Nil, **Conflict of Interest:** None declared.

\*\*\*\*\*